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CORPORATION ANNUAL REPORT



DOCUMENT # P93000020250

DIVISION OF CORPORATIONS

Mar 09, 1999 8:00 am Secretary of State **PROFIT** FLORIDA DEPARTMENT OF STATE **Katherine Harris** Secretary of State 1999

03-09-1999 90017 050 ***150.00

GENO	17, INO.							
Principal F	Place of Business	Mailing Address					EL)	
i i	BAYSHORE DRIVE	1717 NORTH BAYSHORE DR APT 3640 MIAMI.FL.33132	RIVE		DO,NOT,WRITE.II	Ŋ.THIS.SPACE 🗻		بتبج
					3. Date Incorporated or Qualifed 03/17/1993			
2 Princin	al Place of Business	2a. Mailing Address		* W	4. FEI Number	I A	pplied For	
21	ar race or business	26			APPLIED FOR	— — —	ot Applicable	
	Apt. #, etc.	Suite, Apt. #, etc.				\$8.75	Additional	
22 !		27			5. Certifcate of Status Desired	Fee R	equired	
City &	State	City & State			6. Election Campaign Financing		May Be	
23		28			Trust Fund Contribution	Added	to Fees	
Zip	Country	Zip	Cou	ntry	8. This corporation owes the current			
24	25	29	30		Personal Property Tax. 10. Name and Address of New Regi	☐ Yes	□No	
;	9. Name and Address of Cur	rent Registered Agent		81 Name	10. Name and Address of New Regi	stereo Agent		
Mi	ARTIN, MARC-ANTOINE							
	717 NORTH BAYSHORE DRIVE			82 Street Add	iress (P.O. Box Number is Not Acceptable))		
	PT 3640			83				
	IAMI FL 33132			99				
'';				84 City		FL 85 Zip	Code	
;				1			n registered.	
11. Pursu	ant to the provisions of Sections 607.0	502 and 607.1508. Florida Statut	es, the at	ove-named corp	poration submits this statement for the puri	pose of changing it	P'I BRIDIEI BO	==
11. Pursu	rant to the provisions of Sections 607.0 of registered agent, or both, in the Sta	0502 and 607,1508, Florida Statut ate of Florida, Such change was a ligations of Section 607,0505. Flo	es, the at uthorized	ove-named corporations	poration submits this statement for the pur- ion's board of directors. I hereby accept the	e appointment as r	egistered	=
agent	t. I am familiar with, and accept the obl	0502 and 607,1508, Florida Statut ate of Florida. Such change was a ligations of, Section 607,0505, Flo	es, the at uthorized rida Statu	ove-named corporation tes.	poration submits this statement for the puri ion's board of directors. I hereby accept th	e appointment as re	egistered	=
11. Pursu office agent SIGNATU	t. I am familiar with, and accept the obl	ligations of, Section 607.0505, Flo	nda Statu	oove-named corp by the corporati ites. Agent signature require		pose of changing it e appointment as re	egistered	(a)
agent	t. I am familiar with, and accept the obl IRE Signature, typed or printed name of registered	agent and title if applicable. (NOTE AND DIRECTORS	nda Statu	ites.		DATE ERS AND DIRECTO	ORS IN 12	1/98/
agent SIGNATÜ	t. I am familiar with, and accept the obl IRE Signature, typed or printed name of registered	agent and title if applicable. (NOTE	: Registered	Agent signature require	red when reinstating)	DATE	ORS IN 12	(11/98)
SIGNATU 12. TITLE NAME	It am familiar with, and accept the obl IRE Signature, typed or printed name of registered OFFICERS PD OTTO-BRUC, EUGENE	agent and title if applicable. (NOTE AND DIRECTORS	Registered	Agent signature require	red when reinstating)	DATE ERS AND DIRECTO	ORS IN 12	134 (11/98)
SIGNATU 12. TITLE NAME	PD OTTO-BRUC, EUGENE RESS 1717 NORTH BAYSHORE DR	agent and title if applicable. (NOTE AND DIRECTORS	Registered 13. 1.1 TIT	Agent signature require	red when reinstating)	DATE ERS AND DIRECTO	ORS IN 12	DE034 (11/98)
SIGNATU 12. TITLE NAME	IT am familiar with, and accept the obl IRE Signature, typed or printed name of registered OFFICERS PD OTTO-BRUC, EUGENE 1717 NORTH BAYSHORE DR MIAMI FL 33132	agent and title if applicable. (NOTE AND DIRECTORS DELETÉ	: Registered 13. 1.1 TIT 1.2 NA 1.3 ST 1.4 CIT	Agent signature require LE ME REET ADDRESS Y-ST-ZIP	red when reinstating)	DATE ERS AND DIRECTO	ORS IN 12	P2E034 (11/98)
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14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: MARC

02/16/1999